## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
FREEDOMWORKS FOR AMERICA		
	C C00499020	
	M = M / D = D / Y = Y = Y	
Check if 24-hour report 48-hour report New report Amends report filed		
Full Name of Payee Joel Davis	Date of Public Distribution/Dissemination	
Joel Davis	05 01 / Y Y Y Y Y	
Mailing Address 200 S. 2nd Ave.	Amount	
City State Zip Code	4000.00	
Paden City WV 26159	Transaction ID : SE.26905  Date of Disbursement or Obligation	
Purpose of Expenditure IE-Bevin-Strategic Consulting  Category/ Type 001	05 O1 / 2014	
Name of Federal Candidate Support Office	e Sought: House District:00	
MATTHEW GRISWOLD BEVIN Oppose	President State: KY	
070750 40	ursement For: X Primary General	
Per Election for Office Sought 270753.40 2014	Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Candace Franklin	M = M / D = D / Y = Y = Y	
Mailing Address 1687 KY Hwy 1247	05 01 2014	
Mailing Address 1687 KY Hwy 1247	Amount	
City State Zip Code	4000.00	
City State Zip Code Stanford KY 40484	Transaction ID : SE.26906	
	Date of Disbursement or Obligation	
Purpose of Expenditure IE-Bevin-Strategic Consulting  Category/ Type 001	05 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Type Type	55 51 251	
Name of Federal Candidate Support Offic	e Sought: House District: 00	
MATTHEW GRISWOLD BEVIN Oppose	President X Senate State: KY	
Calendar Year-To-Date Disb	ursement For: Primary General	
Per Election for Office Sought 278753.40	4	
	Other (specify) -	
( ) QUIDTOTAL ( )		
(a) SUBTOTAL of Itemized Independent Expenditures	8000.00	
(1) CUPTOTAL (11) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(a) TOTAL Index and dark Fun and its use		
(c) TOTAL Independent Expenditures	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert		
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political		
party committee) any political party committee or its agent.		
R. Russ Walker	M / D D / Y Y Y Y	
[Electronically Filed] Date	05 02 2014	
Signature		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	TOTILO	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		C C00499020
Check if Z 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee		Date of Public Distribution/Dissemination
Freedomworks, Inc.		05 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 N Capitol St., NW		Amount
Suite 735	7:- Cada	0.74
	Zip Code 20001	2.74 Transaction ID : SE.26903
Purpose of Expenditure	Ontonomia	Date of Disbursement or Obligation
IE-McConnell-Email/Social Media/Printing	Category/ Type 004	05 / 01 / 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 00
MITCH MCCONNELL	X Oppose	President X Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 27	78756.14 Disk 2014	oursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Chris Gallaher		05 01 2014
Mailing Address 118 Butleight Ct.		Amount
City State 2	Zip Code	5000.00
Goodlettsville TN	87072	Transaction ID : SE.26904 Date of Disbursement or Obligation
Purpose of Expenditure IE-Bevin-Strategic Consulting	Category/ Type 001	05 01 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 00
MATTHEW GRISWOLD BEVIN	Oppose	President State: KY
Calendar Year-To-Date Per Election for Office Sought	266753.40 Disk 201	oursement For:  Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		5002.74
	,	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>•</b>	7 7
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
R. Russ Walker [Electronic	77 7717 77	05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER ▼	
FREEDOWWORKS FOR AMERICA	C C00499020	
Check if X 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination	
Michelle Ray	05 01 7 2014	
Mailing Address 8404 Cedar Grove	Amount	
City State Zip Code	4000.00	
	Transaction ID : SE.26907 Date of Disbursement or Obligation	
Purpose of Expenditure IE-Bevin-Strategic Consulting  Category/ Type  001	05 01 2014	
Name of Federal Candidate Support Office	Sought: House District: 00	
MATTHEW GRISWOLD REVIN	President State: KY	
Calendar Year-To-Date Per Election for Office Sought  Disburg 274753.40  Disburg 2014	sement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
	M - M / D - D / Y - Y - Y - Y	
Mailing Address	Amount	
City State Zip Code		
	Date of Dishurancest or Obligation	
Purpose of Expenditure  Category/ Type	Date of Disbursement or Obligation	
Name of Federal Candidate Support Office	Sought: House District:	
Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	rsement For: Primary General  Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	4000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	17002.74	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.		
R. Russ Walker  [Electronically Filed] Date		
Ognatio		